

In re Graham Todd Kyle & Noemi Kyle  
**Debtor**

Case No. 2:10-bk-07894-GBN  
**(If known)**

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor’s own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an “H,” “W,” “J,” or “C” in the column labeled “Husband, Wife, Joint, or Community.” If the debtor holds no interest in real property, write “None” under “Description and Location of Property.”

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write “None” in the column labeled “Amount of Secured Claim.”

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Homestead  STREET ADDRESS: 4066 East Windsor Drive Gilbert, Arizona 85236  LEGAL DESCRIPTION: See Exhibit "A."	Fee Simple	H	86,000.00	Exceeds Value
Total ➤			86,000.00	

(Report also on Summary of Schedules.)

## **EXHIBIT "A" - Legal Description**

Parcel No. 1:

Unit 309 the Gardens, Parcel S Condominium, according to Declaration of Condominium recorded in Recording No. 2003-1451116 amended in Recording No. 2004-217986, and plat recorded in Book 671 of Maps, Page 46 Records of Maricopa County, Arizona.

Parcel No. 2:

An easement for ingress, egress and use rights of common areas, master common areas and plat common areas granted in the Declaration of covenants, conditions, restrictions and easements for the Gardens in Recording No. 2002-39460 re-recorded in Recording No. 2002-193711 and in the Condominium Declaration of the Gardens Parcel 5 Condominium in Recording No. 2003-1451116.

Kyle, Graham & Noemi  
Case No. 2:10-bk-07894-GBN

In re Graham Todd Kyle & Noemi KyleCase No. 2:10-bk-07894-GBN

Debtor

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account Chase Bank Account Ending in 2613	H	58.22
		Checking Account Chase Bank Account Ending in 3705	W	8.84
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods & Furnishings	C	2,500.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Men's Clothing	C	400.00
		Women's Clothing	C	400.00
7. Furs and jewelry.		Wedding Rings	C	1,400.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Long-term Disability Insurance Policy (through employer)	W	0.00
		Life Insurance Policy	W	0.00
10. Annuities. Itemize and name each issuer.	X			

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**(If known)**

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401(k) Profit Sharing Plan John Hancock Contract No. 17366 Value as of 12/31/2009	C	1,107.07
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.		Claim for diminished value to BMW 328i (see SofA #8)	C	Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

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Case No. 2:10-bk-07894-GBN  
**(If known)**

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2003 Nissan Altima 2008 Yamaha R6 1985 Chevy Pick Up 2007 BMW 328i Equitable ownership, 100% Legal ownership, 50% Kelley Blue Book Private Party Value	C H C C	5,950.00 4,920.00 2,400.00 17,015.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Computer, Desk, Printer	C	500.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached Total				\$ 36,659.13

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Graham Todd Kyle & Noemi KyleCase No. 2:10-bk-07894-GBN

Debtor

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

☐ 11 U.S.C. § 522(b)(2)

☐ Check if debtor claims a homestead exemption that exceeds \$146,450\*.

☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Homestead	(Husb)ARS § 33-1101	136,875.00	86,000.00
Checking Account	(Husb)ARS § 33-1126(8)	150.00	58.22
Checking Account	(Wife)ARS § 33-1126(8)	150.00	8.84
Household Goods & Furnishings	(Husb)ARS § 33-1123 (Wife)ARS § 33-1123	4,000.00 4,000.00	2,500.00
Men's Clothing	(Husb)ARS § 33-1125(1)	500.00	400.00
Wedding Rings	(Husb)ARS § 33-1125(4) (Wife)ARS § 33-1125(4)	1,000.00 1,000.00	1,400.00
1985 Chevy Pick Up	(Wife)ARS § 33-1125(8)	5,000.00	2,400.00
Computer, Desk, Printer	(Wife)ARS § 33 -1130 (1)	2,500.00	500.00
Women's Clothing	(Wife)ARS § 33-1125(1)	500.00	400.00
401(k) Profit Sharing Plan	(Wife)ARS §33-1126B	100%	1,107.07
2007 BMW 328i	(Husb)ARS § 33-1125(8)	5,000.00	17,015.00
Long-term Disability Insurance Policy (through employer)	(Wife)ARS § 33-1126 (A)(4)	100%	0.00
Life Insurance Policy	(Wife)ARS § 33-1126 (A)(6)	100%	0.00
Claim for diminished value to BMW 328i (see SofA #8)	(Husb)ARS § 33-1126 (A)(5)	100%	Unknown

\*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**B6D (Official Form 6D) (12/07)**In re Graham Todd Kyle & Noemi Kyle,Case No: 2:10-bk-07894-GBN

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1000861452  BMW of North America, LLC 300 Chestnut Ridge Road Woodcliff Lake, NJ 07677-7731	X H	Incurred: 6/2009 Lien: PMSI in vehicle Security: BMW 328i  VALUE \$ 17,015.00				30,481.39	13,466.39
ACCOUNT NO. GGC0632  Gardens Gilbert Community 3930 S. Alma School Rd., Ste. 10 Chandler, AZ 85248	C	Incurred: 3/2007 - 3/2010 Lien: HOA Dues Security: Homestead  VALUE \$ 68,000.00				980.80	This amount based upon existence of Superior Liens
ACCOUNT NO. GPF0309  Gardens Parcel 5 Condominiums 3930 S. Alma School Rd., Ste. 10 Chandler, AZ 85248	C	Incurred: 3/2007 - 3/2010 Lien: HOA Dues Security: Homestead  VALUE \$ 86,000.00				865.00	This amount based upon existence of Superior Liens
Subtotal (Total of this page) ▶						\$ 32,327.19	\$ 15,312.19
Total (Use only on last page) ▶						\$	\$

1 continuation sheets attached

(Report also on  
Summary of Schedules)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

## B6D (Official Form 6D) (12/07) – Cont.

In re Graham Todd Kyle & Noemi Kyle,Case No. 2:10-bk-07894-GBN

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0176-6211-0214-0044 HSBC Retail Services PO Box 5253 Carol Stream, IL 60197-5253	H	Incurred: 4/10/2008 Lien: PMSI Security: 2008 Yamaha R6  VALUE \$ 4,920.00				11,353.18	6,433.18
ACCOUNT NO. 62015490 USAA Savings Bank 10750 McDermott Freeway San Antonio, TX 78288	H	Incurred: 04/26/2007 Lien: PMSI Security: 2003 Nissan Altima  VALUE \$ 5,950.00				6,905.33	955.33
ACCOUNT NO. 0204278238 Wells Fargo Home Mortgage PO Box 10368 Des Moines, IA 50306	X H	Incurred: 2007 Lien: First Mortgage Security: Homestead  VALUE \$ 86,000.00				208,573.00	122,573.00
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
Subtotal (s) (Total(s) of this page)						\$ 226,831.51	\$ 129,961.51
Total(s) (Use only on last page)						\$ 259,158.70	\$ 145,273.70

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims(Report also on  
Summary of Schedules)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

In re Graham Todd Kyle & Noemi Kyle  
DebtorCase No. 2:10-bk-07894-GBN  
(if known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*\*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

**B6E (Official Form 6E) (04/10) - Cont.**

In re Graham Todd Kyle & Noemi Kyle  
Debtor

Case No. 2:10-bk-07894-GBN  
(if known)

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

1 continuation sheets attached

In re Graham Todd Kyle & Noemi Kyle,  
Debtor

Case No. 2:10-bk-07894-GBN  
(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)      Sec. 507(a)(8)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above..)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.    xxx-xx-4978  Arizona Department of Revenue Attn: Bankruptcy/Litigation Section 1600 W Monroe, Room 720 Phoenix, AZ 85007	J	Incurred: 2009 Consideration: 1040 taxes				478.00	478.00	0.00
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Subtotal ➤						\$    478.00	\$	\$
(Totals of this page)								
Total ➤						\$    478.00		
(Use only on last page of the completed Schedule E.) Report also on the Summary of Schedules)								
Totals ➤						\$	\$    478.00	\$    0.00
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								

Sheet no. 1 of 1 continuation sheets attached to Schedule of  
Creditors Holding Priority Claims

In re Graham Todd Kyle & Noemi Kyle,Case No. 2:10-bk-07894-GBN

Debtor

(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. MNETAHW001044**** Ahwatukee Sports & Spine 4530 East Muirwood Drive Phoenix, AZ 85048-7693	H	Incurred: 3/2009 Consideration: Medical Services				788.00
ACCOUNT NO. 1000861452 BMW Bank of North America PO Box 78066 Phoenix, AZ 85062-8066	H	Consideration: Auto Loan				Notice Only
ACCOUNT NO. 512107505034XXXX CitiBank 701 E. 60th St Sioux Falls, SD 57104	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 512107505034XXXX CitiBank 8725 W Sahara Ave The Lakes, NV 89163	W	Incurred: 04/2005 Consideration: Credit card debt				2,200.00
9 continuation sheets attached						Subtotal ➤ \$ 2,988.00
						Total ➤ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7805223447100 CitiBank PO Box 22828 Rochester, NY 14692	H	Incurred: 2/2005 Consideration: Student Loan				10,229.82
ACCOUNT NO. Unknown Desert Valley Radiology 8380 S Kyrene Rd, #105 Tempe, AZ 85284	W	Incurred: 11//142006 Consideration: Medical Services				184.00
ACCOUNT NO. None Doris Meldrum 1425 N Diane Circle Mesa, AZ 85203	H					Unknown
ACCOUNT NO. KYLENO000 East Valley Family Dermatologist 1100 S Dobson Rd Ste223 Chandler, AZ 85286	W	Incurred: 08/26/2009 Consideration: Medical Bills				177.39
ACCOUNT NO. KYLEGR000 East Valley Family Dermatologist 1100 S Dobson Rd Ste223 Chandler, AZ 85286	H	Incurred: 02/04/2009 Consideration: Medical Bills				169.78

Sheet no. 1 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 10,760.99

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

## B6F (Official Form 6F) (12/07) - Cont.

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2074398 Gilbert Hospital 5656 S Power Rd Gilbert, AZ 85295	W	Incurred: 11/23/2008 Consideration: Medical Services				1,623.68
ACCOUNT NO. None Ginni Liesch 1425 N Diane Circle Mesa, AZ 85203	H	Incurred: 8/2005 Consideration: Equalization per Divorce Decree				Unknown
ACCOUNT NO. GHW043/007109857/A90 Grant & Weber Arizona, Inc 14795 N 78th Way Ste 800 Scottsdale, AZ 85260	H	Collecting for Mercy Gilbert Medical Center				Notice Only
ACCOUNT NO. GHW043/007053709/A92 Grant & Weber Arizona, Inc. 14795 N 78th Way Ste. 800 Scottsdale, AZ 85260	W	Collecting for Mercy Gilbert Medical Center				Notice Only
ACCOUNT NO. 0176-6211-0214-0044 HSBC Retail Services Debt Cancellation Processing Center PO Box 6989 Bridgewater, NJ 08807-9787	H	Consideration: Auto Loan				Notice Only

Sheet no. 2 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 1,623.68

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7204-6021-0066-8831 HSBC Retail Services PO Box 15521 Wilmington, DE 19850-5521	H	Incurred: 2007 Consideration: Credit card debt				2,887.64
ACCOUNT NO. 7204-6021-0066-8831 HSBC Retail Services PO Box 15524 Wilmington, DE 19850-5524	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 0176-6211-0214-0044 HSBC Retail Services PO Box 60107 City of Industry, CA 91716-0107	H	Consideration: Auto Loan				Notice Only
ACCOUNT NO. 7204-6021-0066-8831 HSBC Retail Services PO Box 60148 City of Industry, CA 91716-0148	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 28251037XXXX J R Brothers Finance 10000 N 31st Ave Ste D20 Phoenix, AZ 85051	H	Incurred: 01/01/2008 Consideration: Medical Services Collecting for Desert Valley Rad OP				Notice Only

Sheet no. 3 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 2,887.64

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. None Linda Liesch 1230 HC 31 Happy Jack, AZ 86024	H					Unknown
ACCOUNT NO. F0171075/ F0171223/ F0172838/ F0197063 Mercy Gilbert Medical Center File 50576 Los Angeles, CA 90074	H	Incurred: 02/27/2009 Consideration: Medical Services				1,332.50
ACCOUNT NO. K20504939 Mercy Gilbert Medical Center File 50576 Los Angeles, CA 90074	H	Consideration: Medical Services				375.00
ACCOUNT NO. MNETAHW001044**** MNet Financial, Inc. 61 Columbia D Aliso Viejo, CA 92656	H	Consideration: Medical Services Collecting for Ahwatukee Sports & Spine				Notice Only
ACCOUNT NO. 9XXXX Nelnet LNS PO Box 1649 Denver, CO 80201	W	Incurred: 02/01/2006 Consideration: Student Loan				7,955.00

Sheet no. 4 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 9,662.50

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. EK3XXXX Pinnacle Credit Services 7900 Highway 7, #100 Saint Louis Park, MN 55426	W	Collecting for Verizon Wireless				Notice Only
ACCOUNT NO. 9410450903 Sallie Mae 1002 Arthur Dr Lynn Haven, FL 32444	H	Consideration: Student Loan				Notice Only
ACCOUNT NO. 9410450903 Sallie Mae 11100 USA Pkwy Fishers, IN 46037	H	Incurred: 4/2008 Consideration: Student Loan				Notice Only
ACCOUNT NO. 9410450903 Sallie Mae 50 Braintree Hill Off PK Braintree, MA 02184	H	Incurred: 8/2008 Consideration: Student Loan				48,966.88
ACCOUNT NO. 1206056000156XXXX Stuart Allan & Assoc 5447 E 5th St Ste 110 Tucson, AZ 85711	W	Incurred: 04/01/2006 Consideration: Other				215.00

Sheet no. 5 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 49,181.88

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 9-420-585-869 Target National Bank c/o Target Credit Services PO Box 1581 Minneapolis, MN 55440-1581	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 9-420-585-869 Target National Bank c/o Target Credit Services PO Box 673 Minneapolis, MN 55440-0673	H	Incurred: 2008 Consideration: Credit card debt				485.96
ACCOUNT NO. 9-420-585-869 Target National Bank PO Box 59317 Minneapolis, MN 55459-0317	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. xxx-xx-4978 US Department of Education PO Box 5609 Greenville, TX 75403	H	Incurred: 1/2008 Consideration: Student Loan				25,230.52
ACCOUNT NO. 5491-2372-5974-5936 USAA Credit Card Services 10750 McDermott Fwy San Antonio, TX 78288-0570	H	Consideration: Credit card debt				Notice Only

Sheet no. 6 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 25,716.48

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3743-550003-60350 USAA Credit Card Services PO Box 14050 Las Vegas, NV 89114-4050	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 3743-550003-60350 USAA Credit Card Services PO Box 34894 San Anonio, TX 78265	C	Incurred: 2008 Consideration: Credit card debt				1,443.57
ACCOUNT NO. 3743-550003-60350 USAA Credit Card Services PO Box 475074 San Antonio, TX 78265	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 5491-2372-5974-5936 USAA Credit Card Services PO Box 65020 San Antonio, TX 78265-5020	H	Incurred: 2007 Consideration: Credit card debt				991.60
ACCOUNT NO. EK3XXXX Verizon Wireless PO Box 96082 Bellvue, WA 98009	C	Incurred: 01/01/2008 Consideration: Cell Phone				458.00

Sheet no. 7 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 2,893.17

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2152042 VGM Homelink PO Box 142 La Crosse, WI 54602-0142	W	Consideration: Medical Services				Notice Only
ACCOUNT NO. 2152042 VGM Homelink PO Box 78492 Milwaukee, WI 53278	W	Incurred: 2/24/2010 Consideration: Medical Services				340.64
ACCOUNT NO. 4071-1000-1909-1978 Wells Fargo Financial Cards PO Box 14487 Des Moines, IA 50306-4487	H	Consideration: Credit card debt				Notice Only
ACCOUNT NO. 4071-1000-1909-1978 Wells Fargo Financial Cards PO Box 5943 Sioux Falls, SD 57117-5943	H	Incurred: 2008 Consideration: Credit card debt				5,440.57
ACCOUNT NO. 4071-1000-1909-1978 Wells Fargo Financial Cards PO Box 98791 Las Vegas, NV 89193-8791	H	Consideration: Credit card debt				Notice Only

Sheet no. 8 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 5,781.21

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Graham Todd Kyle & Noemi Kyle,  
DebtorCase No. 2:10-bk-07894-GBN  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0204278238 Wells Fargo Home Mortgage 7255 Baymeadows Way Jacksonville, FL 32256	H	Consideration: Home Loan				Notice Only
ACCOUNT NO. 0204278238 Wells Fargo Home Mortgage 8480 Stagecoach Cir Frederick, MD 21701	H	Consideration: Home Loan				Notice Only
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 9 of 9 continuation sheets attached  
to Schedule of Creditors Holding Unsecured  
Nonpriority Claims

Subtotal &gt; \$ 0.00

Total &gt; \$ 111,495.55

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re

Graham Todd Kyle & Noemi Kyle

Case No.

2:10-bk-07894-GBN

Debtor

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor’s interest in contract, i.e., “Purchaser,” “Agent,” etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child’s initials and the name and address of the child’s parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child’s name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒

 Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR’S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re Graham Todd Kyle & Noemi Kyle**Debtor**Case No. 2:10-bk-07894-GBN**(if known)****SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Sarahi Arrivillaga 4126 N 31st Ave Phoenix, AZ 85017  Sarahi Noriega	Citi Bank 8725 W Sahara Ave The Lakes, NV 89163
Linda J Kyle 1955 W Baseline Rd 113-317 Mesa, AZ 85202	Wells Fargo Home Mortgage PO Box 10368 Des Moines, IA 50306
Linda J Kyle 1955 W Baseline Rd 113-317 Mesa, AZ 85202	BMW of North America, LLC 300 Chestnut Ridge Road Woodcliff Lake, NJ 07677-7731

In re Graham Todd Kyle & Noemi KyleCase 2:10-bk-07894-GBN

Debtor

(if known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Daughter, Daughter	AGE(S): 2, 9
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	Student	QA Analyst
Name of Employer	N/A	Sagcor Life Insurance
How long employed	2 yrs, 3 mos	3 yrs, 8 mos
Address of Employer	4343 N Scottsdale Rd Ste 300	
	Scottsdale, AZ 85296	

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions

(Prorate if not paid monthly.)

DEBTOR	SPOUSE
\$ 0.00	\$ 3,548.48

2. Estimated monthly overtime

\$ 0.00	\$ 0.00
---------	---------

3. SUBTOTAL

\$ 0.00	\$ 3,548.48
---------	-------------

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security

- b. Insurance

- c. Union Dues

- d. Other (Specify: \_\_\_\_\_)

\$ 0.00	\$ 262.28
\$ 0.00	\$ 388.18
\$ 0.00	\$ 0.00
\$ 0.00	\$ 0.00

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 0.00	\$ 650.46
---------	-----------

- 6.. TOTAL NET MONTHLY TAKE HOME PAY

\$ 0.00	\$ 2,898.02
---------	-------------

7. Regular income from operation of business or profession or farm

(Attach detailed statement)

\$ 0.00	\$ 0.00
---------	---------

8. Income from real property

\$ 0.00	\$ 0.00
---------	---------

9. Interest and dividends

\$ 0.00	\$ 0.00
---------	---------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ 0.00	\$ 0.00
---------	---------

11. Social security or other government assistance

(Specify) (D) Scholarships/Grants

\$ 367.16	\$ 0.00
-----------	---------

12. Pension or retirement income

\$ 0.00	\$ 0.00
---------	---------

13. Other monthly income

(Specify)

\$ 0.00	\$ 0.00
---------	---------

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ 367.16	\$ 0.00
-----------	---------

15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)

\$ 367.16	\$ 2,898.02
-----------	-------------

16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15)

\$ 3,265.18	
-------------	--

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Debtor is a full-time student. Grant &amp; Scholarship information is based on total received in 2009, divided by 12.

In re Graham Todd Kyle & Noemi KyleCase No. 2:10-bk-07894-GBN**Debtor****(if known)****SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,530.00</u>
a. Are real estate taxes included? Yes <u>✓</u> No _____		
b. Is property insurance included? Yes <u>✓</u> No _____		
2. Utilities: a. Electricity and heating fuel	\$	<u>115.00</u>
b. Water and sewer	\$	<u>57.00</u>
c. Telephone	\$	<u>145.00</u>
d. Other _____	\$	<u>0.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>100.00</u>
4. Food	\$	<u>400.00</u>
5. Clothing	\$	<u>50.00</u>
6. Laundry and dry cleaning	\$	<u>0.00</u>
7. Medical and dental expenses	\$	<u>75.00</u>
8. Transportation (not including car payments)	\$	<u>450.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>80.00</u>
10. Charitable contributions	\$	<u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>0.00</u>
b. Life	\$	<u>0.00</u>
c. Health	\$	<u>0.00</u>
d. Auto	\$	<u>310.92</u>
e. Other _____	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) _____	\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>0.00</u>
b. Other <u>Altima</u>	\$	<u>253.83</u>
c. Other <u>BMW</u>	\$	<u>524.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other _____	\$	<u>0.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)	\$	<u>4,090.75</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
None		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I (Includes spouse income of \$2,898.02. See Schedule I)	\$	<u>3,265.18</u>
b. Average monthly expenses from Line 18 above	\$	<u>4,090.75</u>
c. Monthly net income (a. minus b.) (Net includes Debtor/Spouse combined Amounts)	\$	<u>-825.57</u>

# United States Bankruptcy Court

## District of Arizona

In re Graham Todd Kyle & Noemi Kyle  
Debtor

Case No. 2:10-bk-07894-GBN

Chapter 7

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

#### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 86,000.00		
B – Personal Property	YES	3	\$ 36,659.13		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	2		\$ 259,158.70	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 478.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	10		\$ 111,495.55	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 3,265.18
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,090.75
<b>TOTAL</b>		24	\$ 122,659.13	\$ 371,132.25	

# United States Bankruptcy Court

## District of Arizona

In re Graham Todd Kyle & Noemi Kyle  
Debtor

Case No. 2:10-bk-07894-GBN

Chapter 7

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 478.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 84,427.22
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	<b>\$ 84,905.22</b>

#### State the Following:

Average Income (from Schedule I, Line 16)	\$ 3,265.18
Average Expenses (from Schedule J, Line 18)	\$ 4,090.75
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ 3,619.78

#### State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 145,273.70
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 478.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 111,495.55
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 256,769.25

In re Graham Todd Kyle & Noemi KyleCase No. 2:10-bk-07894-GBN

Debtor

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date April 2, 2010Signature: /s/ Graham Todd Kyle

Debtor:

Date April 2, 2010Signature: /s/ Noemi Kyle

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# UNITED STATES BANKRUPTCY COURT

## District of Arizona

In Re Graham Todd Kyle & Noemi KyleCase No. 2:10-bk-07894-GBN  
(if known)

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2010(db)	\$7,482.23	Sagicor Life Insurance Company
2009(db)	\$46,085.16	Sagicor Life Insurance Company (\$42,935.16); A.Z. & Associates, LLC (\$3,150)
2008(db)	\$39,457.93	Sagicor Life Insurance Company
2010(jdb)	\$0.00	None
2009(jdb)	\$22.97	QuikTrip Corporation (W-2 for class action settlement)
2008(jdb)	\$0.00	None

---

**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2010 (db)	\$0.00	None
2009(db)	\$0.00	None
2010(jdb)	\$0.00	None
2009(jdb)	\$3,978.00	Scholarship (\$428); Grants (\$3,550)

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None

☐**3. Payments to creditors**

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
USAA Savings Bank 10750 McDermott Freeway San Antonio, TX 78288	3/18/2010	\$253.83	\$6,905.33
USAA Savings Bank 10750 McDermott Freeway San Antonio, TX 78288	2/18/2010	\$253.83	
USAA Savings Bank 10750 McDermott Freeway San Antonio, TX 78288	1/18/2010	\$253.83	
BMW of North America, LLC (through Linda J. Kyle, Co-Debtor) 300 Chestnut Ridge Road Woodcliff Lake, NJ 07677-7731	1/31/2010	\$528.00	\$30,481.39
BMW of North America, LLC (through Linda J. Kyle, Co-Debtor) 300 Chestnut Ridge Road Woodcliff Lake, NJ 07677-7731	1/1/2010	\$534.00	

None



*b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*\*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
--	----------------------	----------------	-----------------------

None



*c. All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
--	----------------------	-------------	-----------------------

Linda J. Kyle  
1955 W Baseline Rd 113-317  
Mesa, AZ 85202  
Short-term loan for groceries  
Relationship: Debtor's Mother

1/1/2010

\$65.00

\$0.00

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	----------------------	---------------------------------	--------------------------

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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#### 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
--	---	--------------------------------------

#### 6. Assignments and Receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------------	--------------------	---

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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**7. Gifts**

None

☐

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
Goodwill 5263 S Power Road Mesa, Arizona 85212	None	11/18/2009	Clothing & childrens' toys \$150.00

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**8. Losses**

None

☐

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
BMW 328i Value: Unknown	Traffic accident, causing alignment and cosmetic problems Other driver's insurance covered repairs in the amount of \$1,451.76 Liberty Mutual Insurance, Claim #013571195-02	1/13/2010

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**9. Payments related to debt counseling or bankruptcy**

None

☐

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
James F. Kahn James F. Kahn, P.C. 301 E. Bethany Home Road Suite C-195 Phoenix, AZ 85012	3/18/2010	\$1,100.00
Money Management International 9009 West Loop South, 7th Floor Houston Texas 77096-1719	3/22/2010	\$50.00

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**10. Other transfers**

None



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,  
RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY  
TRANSFERRED AND  
VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None



NAME OF TRUST OR OTHER DEVICE

DATE(S) OF  
TRANSFER(S)

AMOUNT OF MONEY OR  
DESCRIPTION AND  
VALUE OF PROPERTY OR  
DEBTOR'S INTEREST IN PROPERTY

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**11. Closed financial accounts**

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF  
INSTITUTION

TYPE OF ACCOUNT, LAST FOUR  
DIGITS OF ACCOUNT NUMBER,  
AND AMOUNT OF FINAL BALANCE

AMOUNT AND  
DATE OF SALE  
OR CLOSING

---

**12. Safe deposit boxes**

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND  
ADDRESS OF BANK  
OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF  
THOSE WITH ACCESS TO BOX  
OR DEPOSITORY

DESCRIPTION OF  
CONTENTS

DATE OF  
TRANSFER OR  
SURRENDER, IF ANY

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**13. Setoffs**

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE  
OF  
SETOFFAMOUNT  
OF  
SETOFF

---

**14. Property held for another person**

None



List all property owned by another person that the debtor holds or controls.

NAME AND  
ADDRESS OF OWNERDESCRIPTION AND  
VALUE OF PROPERTY

LOCATION OF PROPERTY

Marshall Kyle  
12111 Tunstall St.  
Garden Grove, CA 92645

72 Chevy Camaro  
\$5,875.00

Debtors' Home

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**15. Prior address of debtor**

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

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**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Ginni Liesch

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**17. Environmental Sites**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

---

None



- a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME  
AND ADDRESS

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DATE OF  
NOTICE

ENVIRONMENTAL  
LAW

---

None



- b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME  
AND ADDRESS

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DATE OF  
NOTICE

ENVIRONMENTAL  
LAW

---

None



- c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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**18. Nature, location and name of business**

None



- a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF  
SOCIAL-SECURITY OR  
OTHER INDIVIDUAL  
TAXPAYER-I.D. NO.  
(ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS

BEGINNING AND  
ENDING DATES

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME

ADDRESS

**[Questions 19 - 25 are not applicable to this case]**

\* \* \* \* \*

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	April 2, 2010	Signature of Debtor	/s/ Graham Todd Kyle GRAHAM TODD KYLE
Date	April 2, 2010	Signature of Joint Debtor	/s/ Noemi Kyle NOEMI KYLE

0 continuation sheets attached

**Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571**

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

Address

X  
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

**A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.**

# UNITED STATES BANKRUPTCY COURT

## District of Arizona

In re Graham Todd Kyle & Noemi Kyle, Case No. 2:10-bk-07894-GBN  
 Debtor Chapter 7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** - Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

Property No. 1	
<b>Creditor's Name:</b> Wells Fargo Home Mortgage	<b>Describe Property Securing Debt:</b> Homestead
<p>Property will be (<i>check one</i>):</p> <p> <input type="checkbox"/> Surrendered           <input checked="" type="checkbox"/> Retained         </p> <p>If retaining the property, I intend to (<i>check at least one</i>):</p> <p> <input type="checkbox"/> Redeem the property  <input checked="" type="checkbox"/> Reaffirm the debt  <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).         </p> <p>Property is (<i>check one</i>):</p> <p> <input checked="" type="checkbox"/> Claimed as exempt           <input type="checkbox"/> Not claimed as exempt         </p>	

Property No. 2 ( <i>if necessary</i> )	
<b>Creditor's Name:</b> USAA Savings Bank	<b>Describe Property Securing Debt:</b> 2003 Nissan Altima
<p>Property will be (<i>check one</i>):</p> <p> <input type="checkbox"/> Surrendered           <input checked="" type="checkbox"/> Retained         </p> <p>If retaining the property, I intend to (<i>check at least one</i>):</p> <p> <input type="checkbox"/> Redeem the property  <input checked="" type="checkbox"/> Reaffirm the debt  <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. §522(f)).         </p> <p>Property is (<i>check one</i>):</p> <p> <input type="checkbox"/> Claimed as exempt           <input checked="" type="checkbox"/> Not claimed as exempt         </p>	

**PART B** - Personal property subject to unexpired leases. *(All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)*

Property No. 1    NO Leased Property		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 <i>(if necessary)</i>		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

1 continuation sheets attached *(if any)*

**I declare under penalty of perjury that the above indicates my intention as to any property of my Estate securing debt and/or personal property subject to an unexpired lease.**

Date: April 2, 2010

/s/ Graham Todd Kyle

Signature of Debtor

/s/ Noemi Kyle

Signature of Joint Debtor

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

(Continuation Sheet)

### PART A - Continuation

Property No: 3	
<b>Creditor's Name:</b> HSBC Retail Services	<b>Describe Property Securing Debt:</b> 2008 Yamaha R6
<p>Property will be (check one):</p> <p> <input checked="" type="checkbox"/> Surrendered           <span style="margin-left: 100px;"><input type="checkbox"/> Retained</span> </p> <p>If retaining the property, I intend to (check at least one):</p> <p> <input type="checkbox"/> Redeem the property  <input type="checkbox"/> Reaffirm the debt  <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).           </p> <p>Property is (check one):</p> <p> <input type="checkbox"/> Claimed as exempt           <span style="margin-left: 100px;"><input checked="" type="checkbox"/> Not claimed as exempt</span> </p>	

Property No: 4	
<b>Creditor's Name:</b> BMW	<b>Describe Property Securing Debt:</b> 2007 BMW 328i
<p>Property will be (check one):</p> <p> <input type="checkbox"/> Surrendered           <span style="margin-left: 100px;"><input checked="" type="checkbox"/> Retained</span> </p> <p>If retaining the property, I intend to (check at least one):</p> <p> <input type="checkbox"/> Redeem the property  <input checked="" type="checkbox"/> Reaffirm the debt  <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).           </p> <p>Property is (check one):</p> <p> <input checked="" type="checkbox"/> Claimed as exempt           <span style="margin-left: 100px;"><input type="checkbox"/> Not claimed as exempt</span> </p>	

# United States Bankruptcy Court

## District of Arizona

In re Graham Todd Kyle & Noemi Kyle**Debtor**Case No. 2:10-bk-07894-GBN**(If known)**

### CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

#### Certification of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

\_\_\_\_\_  
Printed name and title, if any, of Bankruptcy Petition Preparer  
Address:

\_\_\_\_\_  
Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

X

\_\_\_\_\_  
Signature of Bankruptcy Petition Preparer or officer,  
Principal, responsible person, or partner whose Social  
Security number is provided above.

#### Certification of the Debtor

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code

Graham Todd Kyle & Noemi Kyle

Printed Names(s) of Debtor(s)

X /s/ Graham Todd Kyle

Signature of Debtor

April 2, 2010

Date

Case No. (if known) 2:10-bk-07894-GBNX /s/ Noemi Kyle

Signature of Joint Debtor, (if any)

April 2, 2010

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

AHWATUKEE SPORTS & SPINE 4530 EAST MUIRWOOD DRIVE PHOENIX, AZ 85048-7693	ARIZONA DEPARTMENT OF REVENUE ATTN: BANKRUPTCY/LITIGATION SECTION 1600 W MONROE, ROOM 720 PHOENIX, AZ 85007	BMW BANK OF NORTH AMERICA PO BOX 78066 PHOENIX, AZ 85062-8066
BMW OF NORTH AMERICA, LLC 300 CHESTNUT RIDGE ROAD WOODCLIFF LAKE, NJ 07677-7731	CITIBANK 701 E. 60TH ST SIOUX FALLS, SD 57104	CITIBANK 8725 W SAHARA AVE THE LAKES, NV 89163
CITIBANK PO BOX 22828 ROCHESTER, NY 14692	DESERT VALLEY RADIOLOGY 8380 S KYRENE RD, #105 TEMPE, AZ 85284	DORIS MELDRUM 1425 N DIANE CIRCLE MESA, AZ 85203
EAST VALLEY FAMILY DERMATOLOGIST 1100 S DOBSON RD STE223 CHANDLER, AZ 85286	GARDENS GILBERT COMMUNITY 3930 S. ALMA SCHOOL RD., STE. 10 CHANDLER, AZ 85248	GARDENS PARCEL 5 CONDOMINIUMS 3930 S. ALMA SCHOOL RD., STE. 10 CHANDLER, AZ 85248
GILBERT HOSPITAL 5656 S POWER RD GILBERT, AZ 85295	GINNI LIESCH 1425 N DIANE CIRCLE MESA, AZ 85203	GRANT & WEBER ARIZONA, INC 14795 N 78TH WAY STE 800 SCOTTSDALE, AZ 85260
GRANT & WEBER ARIZONA, INC. 14795 N 78TH WAY STE. 800 SCOTTSDALE, AZ 85260	HSBC RETAIL SERVICES DEBT CANCELLATION PROCESSING CENTER PO BOX 6989 BRIDGEWATER, NJ 08807-9787	HSBC RETAIL SERVICES PO BOX 15521 WILMINGTON, DE 19850-5521
HSBC RETAIL SERVICES PO BOX 15524 WILMINGTON, DE 19850-5524	HSBC RETAIL SERVICES PO BOX 5253 CAROL STREAM, IL 60197-5253	HSBC RETAIL SERVICES PO BOX 60107 CITY OF INDUSTRY, CA 91716-0107
HSBC RETAIL SERVICES PO BOX 60148 CITY OF INDUSTRY, CA 91716-0148	J R BROTHERS FINANCE 10000 N 31ST AVE STE D20 PHOENIX, AZ 85051	LINDA J KYLE 1955 W BASELINE RD 113-317 MESA, AZ 85202
LINDA LIESCH 1230 HC 31 HAPPY JACK, AZ 86024	MERCY GILBERT MEDICAL CENTER FILE 50576 LOS ANGELES, CA 90074	MNET FINANCIAL, INC. 61 COLUMBIA D ALISO VIEJO, CA 92656
NELNET LNS PO BOX 1649 DENVER, CO 80201	PINNACLE CREDIT SERVICES 7900 HIGHWAY 7, #100 SAINT LOUIS PARK, MN 55426	SALLIE MAE 1002 ARTHUR DR LYNN HAVEN, FL 32444

SALLIE MAE 11100 USA PKWY FICHERS, IN 46037	SALLIE MAE 50 BRAINTREE HILL OFF PK BRAINTREE, MA 02184	SARAH ARRIVILLAGA 4126 N 31ST AVE PHOENIX, AZ 85017
STUART ALLAN & ASSOC 5447 E 5TH ST STE 110 TUCSON, AZ 85711	TARGET NATIONAL BANK C/O TARGET CREDIT SERVICES PO BOX 1581 MINNEAPOLIS, MN 55440-1581	TARGET NATIONAL BANK C/O TARGET CREDIT SERVICES PO BOX 673 MINNEAPOLIS, MN 55440-0673
TARGET NATIONAL BANK PO BOX 59317 MINNEAPOLIS, MN 55459-0317	US DEPARTMENT OF EDUCATION PO BOX 5609 GREENVILLE, TX 75403	USAA CREDIT CARD SERVICES 10750 MCDERMOTT FWY SAN ANTONIO, TX 78288-0570
USAA CREDIT CARD SERVICES PO BOX 14050 LAS VEGAS, NV 89114-4050	USAA CREDIT CARD SERVICES PO BOX 34894 SAN ANONIO, TX 78265	USAA CREDIT CARD SERVICES PO BOX 475074 SAN ANTONIO, TX 78265
USAA CREDIT CARD SERVICES PO BOX 65020 SAN ANTONIO, TX 78265-5020	USAA SAVINGS BANK 10750 MCDERMOTT FREEWAY SAN ANTONIO, TX 78288	VERIZON WIRELESS PO BOX 96082 BELLVUE, WA 98009
VGM HOMELINK PO BOX 142 LA CROSSE, WI 54602-0142	VGM HOMELINK PO BOX 78492 MILWAUKEE, WI 53278	WELLS FARGO FINANCIAL CARDS PO BOX 14487 DES MOINES, IA 50306-4487
WELLS FARGO FINANCIAL CARDS PO BOX 5943 SIOUX FALLS, SD 57117-5943	WELLS FARGO FINANCIAL CARDS PO BOX 98791 LAS VEGAS, NV 89193-8791	WELLS FARGO HOME MORTGAGE 7255 BAYMEADOWS WAY JACKSONVILLE, FL 32256
WELLS FARGO HOME MORTGAGE 8480 STAGECOACH CIR FREDERICK, MD 21701	WELLS FARGO HOME MORTGAGE PO BOX 10368 DES MOINES, IA 50306	

**UNITED STATES BANKRUPTCY COURT  
District of Arizona**

In re Graham Todd Kyle & Noemi Kyle ,  
Debtor

Case No. 2:10-bk-07894-GBN

Chapter 7

**VERIFICATION OF LIST OF CREDITORS**

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 2 pages, is true, correct and complete to the best of my knowledge.

Date April 2, 2010

Signature  
of Debtor

/s/ Graham Todd Kyle

GRAHAM TODD KYLE

Date April 2, 2010

Signature  
of Joint Debtor

/s/ Noemi Kyle

NOEMI KYLE

In re Graham Todd Kyle & Noemi Kyle

Chapter 7

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

- |                   |    |          |
|-------------------|----|----------|
| Balance Due ..... | \$ | 1,025.00 |
|-------------------|----|----------|

- ☒ Debtor      ☐ Other (specify)

- ☒ Debtor      ☐ Other (specify)

- ☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

- a. [Other provisions as needed]

Initial client conference including analysis of Debtor's financial situation and advice and assistance in determining whether to file a Petition for Bankruptcy; preparation of voluntary Petition in Bankruptcy; assistance in preparation of Statement of Affairs; assistance in preparation of Schedules of Assets and Liabilities; assistance in preparation of Schedule of Exempt Property (individuals only); preparation of Clerk's Master Mailing List; affidavit of petitioner's counsel; representation at first Meeting of Creditors; telephone conferences with Debtor, Debtor's Trustee, Trustee's counsel, Debtor's creditors, or any other interested parties relating to Debtor's case; and post-petition storage of the legal file for the applicable time period.

In a Chapter 13 Bankruptcy, the following additional services are also included:

Assistance in preparation of a Chapter 13 plan, payment schedule and Plan analysis; copying and mailing Chapter 13 Plan; representation at confirmation hearing, if any, or preparation of the Stipulation for Confirmation and the Order Confirming Chapter 13 Plan.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: \_\_\_\_\_  
Any additional services (not listed above) will be billed at our standard hourly rates.

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

---

*Date*

Signature of Attorney

Name of law firm

In re \_\_\_\_\_

Graham Todd Kyle &amp; Noemi Kyle

Case Number: 2:10-bk-07894-GBN

(If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- ☐ The presumption arises.
- ☒ The presumption does not arise.
- ☐ The presumption is temporarily inapplicable.

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

### Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS

1A

If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

1B

If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.

1C

Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.

☐ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard

- a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and
- ☐ I remain on active duty /or/
- ☐ I was released from active duty on \_\_\_\_\_, which is less than 540 days before this bankruptcy case was filed;
- OR
- b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/
- ☐ I performed homeland defense activity for a period of at least 90 days, terminating on \_\_\_\_\_, which is less than 540 days before this bankruptcy case was filed.

## Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

2	<p>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</p> <p>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11.</p> <p>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</p> <p>d. <input checked="" type="checkbox"/> Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</p>													
	<p>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.</p>			Column A Debtor's Income	Column B Spouse's Income									
3	Gross wages, salary, tips, bonuses, overtime, commissions.			\$ 0.00	\$ 3,548.48									
4	<p>Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.</p> <table border="1" data-bbox="183 1087 1187 1222"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$ 0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$ 0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td>Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$ 0.00	b.	Ordinary and necessary business expenses	\$ 0.00	c.	Business income	Subtract Line b from Line a	\$ 0.00	\$ 0.00
a.	Gross receipts	\$ 0.00												
b.	Ordinary and necessary business expenses	\$ 0.00												
c.	Business income	Subtract Line b from Line a												
5	<p>Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</p> <table border="1" data-bbox="183 1360 1187 1495"> <tr> <td>a.</td> <td>Gross receipts</td> <td>\$ 0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$ 0.00</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td>Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$ 0.00	b.	Ordinary and necessary operating expenses	\$ 0.00	c.	Rent and other real property income	Subtract Line b from Line a	\$ 0.00	\$ 0.00
a.	Gross receipts	\$ 0.00												
b.	Ordinary and necessary operating expenses	\$ 0.00												
c.	Rent and other real property income	Subtract Line b from Line a												
6	Interest, dividends and royalties.			\$ 0.00	\$ 0.00									
7	Pension and retirement income.			\$ 0.00	\$ 0.00									
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.			\$ 0.00	\$ 0.00									
9	<p>Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" data-bbox="183 1873 1182 1936"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor \$ 0.00</td> <td>Spouse \$ 0.00</td> </tr> </table>			Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ 0.00	Spouse \$ 0.00	\$ 0.00	\$ 0.00						
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ 0.00	Spouse \$ 0.00												

10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			
	a.	\$ 71.30		
	b.	\$ 0.00		
	Total and enter on Line 10		\$ 71.30	\$ 0.00
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		\$ 71.30	\$ 3,548.48
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		\$ 3,619.78	
<b>Part III. APPLICATION OF § 707(b)(7) EXCLUSION</b>				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.		\$	43,437.36
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>Arizona</u> b. Enter debtor's household size: <u>4</u>		\$	69,205.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the "The presumption does not arise" box at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. <input type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.			

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

<b>Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)</b>				
16	Enter the amount from Line 12.		\$	N.A.
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.			
	a.	\$		
	b.	\$		
	c.	\$		
	Total and enter on Line 17.		\$	N.A.
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.		\$	N.A.
<b>Part V. CALCULATION OF DEDUCTIONS FROM INCOME</b>				
<b>Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)</b>				
19A	National Standards: food, clothing and items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		\$	N.A.

19B	<p>National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years or older. (The total number of household members must be the same as the number stated in Line 14b). Multiply line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <th colspan="2" style="text-align: left;">Household members under 65 years of age</th><th colspan="2" style="text-align: left;">Household members 65 years of age or older</th></tr> <tr> <td style="width: 5%;">a1.</td><td style="width: 35%;">Allowance per member</td><td style="width: 10%;">N.A.</td><td style="width: 50%;">a2.</td><td style="width: 35%;">Allowance per member</td><td style="width: 10%;">N.A.</td></tr> <tr> <td>b1.</td><td>Number of members</td><td>N.A.</td><td>b2.</td><td>Number of members</td><td></td></tr> <tr> <td>c1.</td><td>Subtotal</td><td>N.A.</td><td>c2.</td><td>Subtotal</td><td>N.A.</td></tr> </table>	Household members under 65 years of age		Household members 65 years of age or older		a1.	Allowance per member	N.A.	a2.	Allowance per member	N.A.	b1.	Number of members	N.A.	b2.	Number of members		c1.	Subtotal	N.A.	c2.	Subtotal	N.A.	\$ N.A.
Household members under 65 years of age		Household members 65 years of age or older																						
a1.	Allowance per member	N.A.	a2.	Allowance per member	N.A.																			
b1.	Number of members	N.A.	b2.	Number of members																				
c1.	Subtotal	N.A.	c2.	Subtotal	N.A.																			
20A	<p>Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$ N.A.																						
20B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%;">a.</td><td style="width: 55%;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 40%;">\$ N.A.</td></tr> <tr> <td>b.</td><td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td><td>\$ N.A.</td></tr> <tr> <td>c.</td><td>Net mortgage/rental expense</td><td>Subtract Line b from Line a</td></tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ N.A.	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$ N.A.	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$ N.A.													
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ N.A.																						
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$ N.A.																						
c.	Net mortgage/rental expense	Subtract Line b from Line a																						
21	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> <p>_____</p> <p>_____</p> <p>_____</p>	\$ N.A.																						
22A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.</p> <p><input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$ N.A.																						
22B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$ N.A.																						

23	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  <input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.</p> <table border="1"> <tr> <td>a.</td> <td>IRS Transportation Standards, Ownership Costs</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td colspan="2">Subtract Line b from Line a.</td> </tr> </table>		a.	IRS Transportation Standards, Ownership Costs	\$	N.A.	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	N.A.	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.		\$	N.A.
a.	IRS Transportation Standards, Ownership Costs	\$	N.A.													
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	N.A.													
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.														
24	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.</p> <table border="1"> <tr> <td>a.</td> <td>IRS Transportation Standards, Ownership Costs</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td colspan="2">Subtract Line b from Line a.</td> </tr> </table>		a.	IRS Transportation Standards, Ownership Costs	\$	N.A.	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	N.A.	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.		\$	N.A.
a.	IRS Transportation Standards, Ownership Costs	\$	N.A.													
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	N.A.													
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.														
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.		\$	N.A.												
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.		\$	N.A.												
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.		\$	N.A.												
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.		\$	N.A.												
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.		\$	N.A.												
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.		\$	N.A.												
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.		\$	N.A.												
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		\$	N.A.												
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32		\$	N.A.												

Subpart B: Additional Expense Deductions under § 707(b)														
Note: Do not include any expenses that you have listed in Lines 19-32.														
34	<p>Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.</p> <table border="1"> <tr> <td>a.</td> <td>Health Insurance</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$</td> <td>N.A.</td> </tr> </table> <p>Total and enter on Line 34.</p> <p>If you do not actually expend this total amount, state your actual average expenditures in the space below: \$ _____ N.A.</p>	a.	Health Insurance	\$	N.A.	b.	Disability Insurance	\$	N.A.	c.	Health Savings Account	\$	N.A.	<p>\$ N.A.</p>
a.	Health Insurance	\$	N.A.											
b.	Disability Insurance	\$	N.A.											
c.	Health Savings Account	\$	N.A.											
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$ N.A.												
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$ N.A.												
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$ N.A.												
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$ N.A.												
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.	\$ N.A.												
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)	\$ N.A.												
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.	\$ N.A.												

## Subpart C: Deductions for Debt Payment

42	<p>Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42.</p> <table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>Average Monthly Payment</th> <th>Does payment include taxes or insurance?</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td></td> <td>\$</td> <td><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td>b.</td> <td></td> <td></td> <td>\$</td> <td><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td>c.</td> <td></td> <td></td> <td>\$</td> <td><input type="checkbox"/> yes <input type="checkbox"/> no</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Total: Add Line a, b and c</td> <td></td> </tr> </tbody> </table>					Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	a.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	b.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no	c.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no				Total: Add Line a, b and c		\$	N.A.
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?																											
a.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																											
b.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																											
c.			\$	<input type="checkbox"/> yes <input type="checkbox"/> no																											
			Total: Add Line a, b and c																												
43	<p>Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.</p> <table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td>b.</td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td>c.</td> <td></td> <td></td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	a.			\$	b.			\$	c.			\$					\$	N.A.					
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount																												
a.			\$																												
b.			\$																												
c.			\$																												
44	<p>Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.</p>				\$	N.A.																									
45	<p>Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.</p> <table border="1"> <tbody> <tr> <td>a.</td> <td>Projected average monthly Chapter 13 plan payment.</td> <td>\$</td> <td>N.A.</td> </tr> <tr> <td>b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</td> <td>x</td> <td>N.A.</td> </tr> <tr> <td>c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td colspan="2">Total: Multiply Lines a and b</td> </tr> </tbody> </table>				a.	Projected average monthly Chapter 13 plan payment.	\$	N.A.	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x	N.A.	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b		\$	N.A.													
a.	Projected average monthly Chapter 13 plan payment.	\$	N.A.																												
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x	N.A.																												
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b																													
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.				\$	N.A.																									
Subpart D: Total Deductions from Income																															
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.				\$	N.A.																									

### Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION

48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$	N.A.
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$	N.A.
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.	\$	N.A.
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$	N.A.
52	<p>Initial presumption determination. Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount set forth on Line 51 is more than \$10,950. Check the "Presumption arises" box at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55).</p>		
53	Enter the amount of your total non-priority unsecured debt	\$	N.A.
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter	\$	N.A.
55	<p>Secondary presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p>		

### Part VII: ADDITIONAL EXPENSE CLAIMS

56	<p>Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p> <table border="1"> <thead> <tr> <th></th> <th>Expense Description</th> <th>Monthly Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td>\$ N.A.</td> </tr> <tr> <td>b.</td> <td></td> <td>\$ N.A.</td> </tr> <tr> <td>c.</td> <td></td> <td>\$ N.A.</td> </tr> <tr> <td colspan="2">Total: Add Lines a, b and c</td> <td>N.A.</td> </tr> </tbody> </table>				Expense Description	Monthly Amount	a.		\$ N.A.	b.		\$ N.A.	c.		\$ N.A.	Total: Add Lines a, b and c		N.A.
	Expense Description	Monthly Amount																
a.		\$ N.A.																
b.		\$ N.A.																
c.		\$ N.A.																
Total: Add Lines a, b and c		N.A.																

### Part VIII: VERIFICATION

57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i></p> <p>Date: <u>April 2, 2010</u> Signature: <u>/s/ Graham Todd Kyle</u> (Debtor)</p> <p>Date: <u>April 2, 2010</u> Signature: <u>/s/ Noemi Kyle</u> (Joint Debtor, if any)</p>	
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Form 22 Continuation Sheet

Income Month 1			Income Month 2		
Gross wages, salary, tips...	0.00	2,984.94	Gross wages, salary, tips...	0.00	2,892.21
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	0.00	0.00
Income Month 3			Income Month 4		
Gross wages, salary, tips...	0.00	6,491.90	Gross wages, salary, tips...	0.00	3,087.12
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	427.80	0.00
Income Month 5			Income Month 6		
Gross wages, salary, tips...	0.00	2,701.47	Gross wages, salary, tips...	0.00	3,133.26
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	0.00	0.00
Additional Items as Designated, if any					
Remarks					